

## Application Data Sheet

---

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	128/200
Suggested Group Art Unit::	3600
CD-ROM or CD-R::	None
Title::	Nasal Mask and System Using Same
Attorney Docket Number::	98-25 C3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1A
Total Drawing Sheets::	9
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appln.?::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Shari
Middle Name::	S
Family Name::	Barnett
City of Residence::	Cardiff
State or Province of Residence::	California
Country of Residence::	USA
Street of mailing address::	1770 Ribemstein Drive
City of mailing address::	Cardiff
State or Province of mailing address::	California
Country of mailing address::	USA
Postal or Zip Code of mailing address::	92007

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Joseph
Middle Name::	M
Family Name::	Miceli
Name Suffix::	Jr.
City of Residence::	Pittsburgh
State or Province of Residence::	Pennsylvania

Country of Residence:: USA  
Street of mailing address:: 4850 Hialeah Drive  
City of mailing address:: Pittsburgh  
State or Province of mailing address:: Pennsylvania  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 15239

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Peter  
Family Name:: Ho  
City of Residence:: Pittsburgh  
State or Province of Residence:: Pennsylvania  
Country of Residence:: USA  
Street of mailing address:: 2227 Chapparral Drive  
City of mailing address:: Pittsburgh  
State or Province of mailing address:: Pennsylvania  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 15239

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Kristine  
Middle Name:: K  
Family Name:: Sabo  
City of Residence:: New Kensington  
State or Province of Residence:: Pennsylvania  
Country of Residence:: USA  
Street of mailing address:: 136 Venango Court  
City of mailing address:: New Kensington  
State or Province of mailing address:: Pennsylvania  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 15068

### **Correspondence Information**

Correspondence Customer Number:: 30031

### **Representative Information**

Representative Customer Number:: 30031

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date:
This Application	Continuation of	09/865,327	05/25/01
09/865,327	Continuation-in-part-of	09/310,548	05/12/99

### Assignee Information

Assignee name:: Respironics, Inc.  
Street of mailing address:: 1010 Murry Ridge Lane  
City of mailing address:: Murrysville  
State or Province of mailing address:: Pennsylvania  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 15668